

BOOK REVIEWS

THE WESTERN JOURNAL OF MEDICINE does not review all books sent to it by the publishers. A list of new books received is carried in the Advertising Section.

PROTOCOLS FOR PREHOSPITAL EMERGENCY MEDICAL CARE—

Jean Abbott, MD, Emergency Physician, Boulder Community Hospital, Boulder, Colorado; Marilyn Gifford, MD, Emergency Physician, EMS Coordinator, St. Joseph's Hospital, Denver; Clark Chipman, MD, Chief, Emergency Services, Emmanuel Hospital, Portland, Oregon; Joseph Engelken, MAPA, Program Director, Emergency Medical Training, School of Allied Health, University of Kansas Medical Center, Kansas City; and Peter Rosen, MD, Director, Division of Emergency Medicine, Denver General Hospital, Clinical Professor of Emergency Medicine, University of Oregon. The Williams & Wilkins Company, 428 E. Preston St., Baltimore (21202). 1980. 191 pages, \$11.95 (softbound).

As the title of this book suggests, it presents information that readers should become well acquainted with before an emergency situation arises. Here is a paperback, concisely prepared in outline form, that shows how to develop protocols for prehospital emergency medical care. Designed for people who have had previous clinical experience, it stresses the use of common sense in the treatment of patients before they come to a hospital. It is not a book for amateurs or lay persons, but is directed primarily toward paramedics and emergency medical technicians. It would also be helpful in the teaching of medical students and residents, and its usefulness for attending physicians who need to develop protocols for the management of emergency situations is obvious.

The heart of the 191-page book is found in the middle three sections. The first of these sections deals with general medical problems such as abdominal pain, respiratory failure, vaginal bleeding, and so forth—24 in all—but it does not discuss specific disease entities. It is aimed at stabilizing patients who have become acutely ill or who have sustained trauma, but does not discuss differential diagnosis or in-depth management. There may be some topics that certain physicians, because of their medical interests or geographical location, wish were included. For instance, a physician in an outlying area in the western states might be interested in a section on animal or snake bites. This part of the book, however, is remarkably complete.

The second section deals with drug protocols. It discusses emergency medications and how they should be administered before the patient enters the hospital. There is a subsection on each drug, briefly discussing its pharmacology, indications, precautions and side effects, with special notes. Once again, because of personal preferences, the reader may have wished certain omitted drugs had been included. It is interesting to note that bretylium, a drug that is not commonly found in a prehospital emergency care setting, was included in this section; whereas digitalis was not. Digitalis may not be considered an emergency drug by the authors of this book, but other physicians might wish that this commonly used medication had been included.

A section of the book is directed toward procedures such as starting IV's, intubations and management of pneumothoraces, to name but a few. It is not the intent of the authors for these descriptions to substitute for actual field training in the use of instrumentation and minor surgical procedures. It is a helpful guide in setting up the protocols on when to apply these commonly used emergency procedures.

The book ends with an example of standing orders for telemetry-equipped emergency services taken from the protocols written for an Emergency Medical Service

Board in Albuquerque, New Mexico. In the section on implementation of emergency care protocols and basic emergency care protocols there is included a recommended basic library for the well-equipped emergency room along with eleven references.

It might be helpful to have a brief chapter on physical findings that are usually, if not always, abnormal when detected, and physical findings that could be accumulated rapidly through use of the physician's hands, ears, and eyes—not necessarily requiring simple diagnostic equipment such as the stethoscope or otoscope. One area this reviewer found especially helpful was the section on neurological assessment.

A distressing lack of standardization, even attempts to standardize prehospital emergency care, throughout the United States is pointed out. This concise guideline does an excellent job showing the usefulness of protocols, giving a skeleton on which to build and tailor protocols to local areas in the United States. *Protocols for Prehospital Emergency Medical Care* should be required reading for directors of emergency care services. It will most likely become a text used in the training of paramedics and emergency medical technicians.

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CLINICAL PHARMACY AND THERAPEUTICS—Second Edition—
Edited by Eric T. Herfindal, PharmD, Clinical Professor and Chairman, Division of Clinical Pharmacy, School of Pharmacy, University of California, San Francisco; and Joseph L. Hirschman, PharmD, Associate Clinical Professor, School of Pharmacy, University of California, San Francisco; General Manager, Professional Health Research, A Division of Health Systems Institute, Burlingame, California. Williams & Wilkins, 428 E. Preston Street, Baltimore, MD (21202), 1979. 719 pages, \$29.95.

This edition of *Clinical Pharmacy and Therapeutics* represents a significant expansion of the initial edition. The 50 chapters, contributed by more than 40 practicing clinical pharmacists and educators, are divided into 13 major sections: general topics, infectious disease, gastrointestinal diseases, cardiovascular disorders, respiratory diseases, endocrine and metabolic diseases, renal disease, rheumatic diseases, diseases of the blood, neurological and psychological disorders, diseases of the eye, skin diseases and neoplastic diseases. New chapters include alcoholism (well done), pediatrics, infective endocarditis, central nervous system infections, thromboembolic disease, cardiac arrhythmias, and insomnia and anxiety. Although the above additions strengthen the text, there are numerous topics left unaddressed. Major deficiencies include fluid and electrolytes, acid-base balance, glomerulonephritis, bacterial pneumonia, chronic pain, cardiogenic shock, and applied principles of clinical pharmacokinetics. Overall, chapters are well organized, generally providing an extended discussion of the disease pathophysiology and diagnosis. Unfortunately, information regarding specific therapy is at times quite general and in places dated (for example, carbamazepine use for seizure disorders is only mentioned, and there is no discussion of problems with long-term glucocorticosteroid therapy). Nevertheless, many chapters contain excellent

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tables and graphs useful in summarizing information. Adequate references through 1978 are provided at the end of most chapters.

The editors state that this text is to "help prepare the pharmacy student . . . to assume a patient-oriented role in health care." *Clinical Pharmacy and Therapeutics* provides sufficient information to the student to approach this goal. I recommend it as an acceptable text for instruction of pharmacy and nursing students in applied therapeutics, recognizing its limitations. It would also be an appropriate addition to the library of most hospital pharmacies. It has little to offer practicing physicians or clinical pharmacists.

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PEDIATRIC GASTROENTEROLOGY—Case Studies—William Liebman, MD, Assistant Professor of Pediatrics, Pediatric Gastroenterology Unit, University of California, San Francisco, School of Medicine. Medical Examination Publishing Co, Inc., 969 Stewart Avenue, Garden City, NY (11530), 1980. 496 pages, \$18.00 (paperback).

As the title indicates the book consists of 58 case studies of 57 different disorders of the gastrointestinal tract in children. Each case study consisted of a one- or two-page presentation of history, physical examination and pertinent laboratory data. Next comes a series of multiple choice questions about the case. The heart of the book is the next section; the correct answer to each question followed by a discussion or commentary. This commentary is referenced, usually 15 to 20 references per case study. Finally, there is an index so that readers can proceed directly to the pages where specific problems, diseases or drugs are discussed. The conditions covered in the case studies include functional bowel disease with inflammatory bowel disease, celiac disease, parasitic infections, shigella and intractable diarrhea, and the like, and represent a broad cross section of gastrointestinal illness.

The author states in the preface that he hopes the material presented will serve as a catalyst for further study in pediatric gastroenterology. If further study includes a careful perusal of the book he has succeeded very well. The book is not intended as a textbook, but for more experienced practitioners serves as a stimulating review using a format a practitioner is most familiar with, the individual patient. For the less experienced student it presents a wealth of information in the comment section that is related to a real patient as presented in the case study. The book is very readable and one quickly finds oneself reading "one more case" in a one on one match with the author until one finds oneself at the 58th case and disappointed that it is the last.

As with any single author text, there is considerable time lag between manuscript and publication, and few references are more recent than 1976, but this does not detract from the information in the commentaries. As in any situation where one tries to simulate progressive actions in the real world in print, at times the situation is contrived. Occasionally in the question section we are expected to request a test, the results of which are given in the laboratory data section, or we are left wondering until the commentary section how frequent is *often*—5 to 10 or 20 or 50 percent? Some questions are obviously included to serve as a springboard for a lively, succinct discussion in the commentary section. Rather than detract from enjoyment of the book the reviewer found it stimu-

lated a mental dialogue with the author, stimulating him to "go one on one with the author in just one more case."

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THE OSTOMY BOOK—Living Comfortably With Colostomies, Ileostomies, and Urostomies—Barbara Dorr Mullen and Kerry Anne McGinn, RN. Bull Publishing Company, P.O. Box 208, Palo Alto, CA (94302), 1980. 236 pages, \$7.95 (paperback).

In the general field of ostomies, this is the most informative book to reach the public. The authors present, in a well-organized, easily readable form, material that should prove valuable to both patients with ostomies and health care professionals.

For the patient, although the realities of living with an ostomy are clearly spelled out, the general tone of the book is optimistic and encouraging. The illustrations are well done so that even a medically unsophisticated reader can recognize the anatomical arrangement of various types of ostomies. Anecdotal experiences, which would have no place in a scientific treatise, are often cited, but these stories only add to the solid flow of facts and instructions in a book aimed primarily at laymen.

Medical professionals will also find considerable merit in *The Ostomy Book*. The comprehensive coverage, not only of the technical details of ileostomies, urostomies and colostomies but of the practical problems of day-to-day care, will undoubtedly add to the education of most physicians and allied health workers, for this is an area of medicine usually skimmed over superficially during their training. Indeed, the focus of the book on the practical aspects of ostomy care is its most important contribution.

Several of the chapters could unnecessarily alarm patients entering a hospital for a major operation. Despite the current malpractice scene, I do not believe that patients are well-served by reciting a litany of possible surgical complications. This criticism reflects a personal bias, and I fully realize that other surgeons may be more concerned about informed consent and only stop short of warning patients that upon returning from the operating room a chunk of plaster may drop off the ceiling and hit them on the head.

Certainly the chapters covering the preoperative and postoperative periods are not conducive to a patient "living comfortably"—a goal mentioned in the subtitle of the book. In these pages, hospital discomfures and operative complications are agonizingly described and can only add to the prospective surgical patient's *jitters*. Thus we find the following:

- ". . . first visit was almost before the cock crowed in the morning;"
- ". . . write up another three dozen orders for tests;"
- "I was introduced to new forms of misery;"
- "blood . . . may form small clots;"
- "We crowded into a cold and tiny bathroom, I didn't like any part of it," and
- "If only they'd stop nagging and leave me alone."

Such comments continue on and on, discussing bladder infections, painful wounds that may take a year to heal and stitches that may pop open.

Not very reassuring. I see no reason for a patient to worry before an x-ray examination about a "fiery heat flash following the injection." I prefer the technician's calmly informing the patient before the injection that it